

P/5000091053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400278509044

11/02/15--01033--028 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV -2 AM 10:30

EFFECTIVE DATE 10/30/15

W15-073479

11/09/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2015

CHRISTOPHER E. MAILAL
19700 W. SAINT ANDREWS DRIVE
MIAMI, FL 33015

SUBJECT: FRESH FIX CORP
Ref. Number: W15000073479

We have received your document for FRESH FIX CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000107682 (FRESH FIX, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 515A00023552

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Fresh Fix Corp.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Christopher E. Mailal

Name (Printed or typed)

19700 W. Saint Andrews Drive

Address

Miami, FL., 33015

City, State & Zip

786-506-6496

Daytime Telephone number

cmailal@aol.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Fresh Fix **CAFE, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19700 W. Saint Andrews Drive

Miami, FL., 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for any lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV - 2 AM 10:30

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher E. Mailal / President Name and Title:

Address 19700 W. Saint Andrews Drive Address:

Miami, FL., 33015

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Christopher E. Mailal
Address: 19700 W. Saint Andrews Drive
Miami, FL., 33015

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Christopher E. Mailal
Address: 19700 W. Saint Andrews Drive
Miami, FL., 33015

FILED
SECRETARY OF STATE
MICHIGAN CORPORATIONS
15 NOV -2 AM 10:30

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/30/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/30/2015

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

10/30/2015

Date